

FLWEMS Paramedics Neonatal & Pediatric Protocol for the Management of:

PEDIATRIC TRAUMA CLASSIFICATION CRITERIA

(Patients 18 y/o or less)

Code Blue

Pediatric patients in cardiopulmonary arrest from trauma.

Class I

Pediatric patients with life threatening injuries and/or unstable vital signs.

- 1. Respiratory arrest or distress requiring advanced airway management.
- 2. Cardiac dysrhythmias or shock.
- 3. Any of the following unstable vital signs.
 - \Rightarrow RR < 10 or > 60 bpm.
 - \Rightarrow SBP < 60mm/Hg (< 5 y/o)
 - \Rightarrow SBP < 80mm/Hg (6-12 y/o)
 - \Rightarrow SBP < 90mm/Hg (> 12 y/o)
- 4. Unstable blunt chest trauma with increased respiratory rate.
- 5. Severe uncontrolled bleeding.
- 6. Penetrating chest trauma.
- 7. Penetrating abdominal trauma.
- 8. Neurological injuries.
 - ⇒ Prolonged loss of consciousness (> 15 minutes).
 - ⇒ Glasgow coma score < 8.
 - ⇒ Acute paralysis.
- 9. Evidence of injury to more than one organ system.
- 10. Burns > 20% of Body Surface Area (BSA) partial and/or full thickness.
- 11. Inhalation burns.

Class II

Pediatric patients with potentially life threatening injuries but vital signs presently stable.

- 1. Falls over three times the height of the patient.
- 2. Penetrating trauma to head, neck, and groin to mid-thigh.
- 3. Death of another passenger in the same vehicle.
- 4. Ejection from vehicle.
- 5. Vehicle passenger space invaded by one foot or more.
- 6. Pedestrian struck by a vehicle, motorcycle or bicycle.
- 7. Patient in a vehicle that rolled over.
- 8. Combination injuries and burns.
- 9. Burns < 20% BSA partial thickness without inhalation injury.

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- 10. Greater than 20 minute extrication time.
- 11. Loss of consciousness < 15minutes.
- 12. Near drowning.
- 13. Class I type injuries over 24 hours old, patient presently stable.

Class III

No obvious life threatening injuries and vital signs stable.

CAIRA/Chemical Surety Considerations

None

Triage Considerations

Refer to S.T.A.R.T. Triage Protocol

END OF SOP – NOTHING FOLLOWS